

EMERGENCY MEDICAL SERVICES AUTHORITY

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**+EMS Local Assistance Grant Funding Opportunity Announcement****ADDENDUM #1**

The following changes, identified below, are incorporated into the +EMS Local Assistance Grant Funding Opportunity Announcement released on December 11, 2015.

Change 1.1 HIOs are added as an eligible applicant

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Eligibility Requirements**1. Eligibility**

- a. The prime applicant must be a LEMSA or a non-profit HIO

Change 1.2 Deliverable Dates are Changed

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F. Deliverables

- c. Demonstrate successful ALERT metrics during a 3-month reporting period, with no less than 10% success rate by the final month of the reporting period, achieved no later than April 30, 2017.
 - 1) The metric is defined as the number of times the ePCR sends relevant patient information to the hospital ED dashboard, divided by the number of new patient encounters created in the ePCR during a 1-month period.

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3. Extra consideration may be given to projects that elect to also meet an additional milestone:

- a. Demonstrate successful RECONCILE metrics during a 1-month reporting period, equaling no less than 10% success rate during that month, achieved no later than June 30, 2017.

Change 1.3 Rights in Data section is amended

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G. Rights in Data

The existing section is deleted.

The new section is:

As part of the ONC Grant, EMSA is required to adhere to the HHS Grants Policy Statement (January 1, 2007). This document describes in detail the issues surrounding Intellectual Property, Rights in Data, and Patents and Inventions (commencing on II-68). Proposers

should review this document to familiarize themselves with the detailed information concerning intellectual property.

In general, recipients own the rights in data resulting from a grant-supported project or program. However, the Notice of Award may indicate alternative rights, e.g., under a cooperative agreement or based on specific programmatic considerations as stated in the applicable program announcement or solicitation. Except as otherwise provided in the Notice of Award, any publications, data, or other copyrightable works developed under an HHS grant may be copyrighted without prior approval.

In all cases, whether HHS funded all or part of the project or program resulting in the data, the Federal government must be given a royalty-free, nonexclusive, and irrevocable license for the Federal government to reproduce, publish, or otherwise use the material and to authorize others to do so for Federal purposes, e.g., to make it available in government-sponsored databases for use by other researchers. The specific scope of Federal government rights with respect to a particular grant-supported effort will be addressed in the Notice of Award. Data developed by a subrecipient also are subject to this policy.

For this purpose, “data” means recorded information, regardless of the form or media on which it may be recorded, and includes writings, films, sound recordings, pictorial reproductions, drawings, designs or other graphic representations, procedural manuals, forms, diagrams, work flow charts, equipment descriptions, data files, data processing or computer programs (software), statistical records, and other research data.

Protected patient health information is not considered data for the purposes of this section.

Change 1.4 Intellectual Property Rights

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9. Intellectual Property Rights

This section is removed in its entirety.

Change 1.5 Confidential Information

Addition

All proposals, bids and materials submitted become property of EMSA. All proposals/bids received are subject to the California Public Records Act, Government Code 6254 et. seq. Any bid or portion of a bid marked “proprietary,” “confidential,” or with similar language will cause the entire submission to be rejected as non-responsive.